



*If your child is currently enrolled at Dance Trap, you do not need to complete this form.*

Child's Name: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent's name (print): \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**Release of Liability**

As the legal parent or guardian, I release and hold harmless Dance Trap, Inc., its owners and operators from any and all liability, claims, demands, and causes of action whatsoever, arising out of or related to any loss, damage, or injury, including death, that may be sustained by the participant while in or upon the premises or any premises under the control and supervision of Dance Trap Inc., its owners and operators or in route to or from any of said premises.

**Video & Photo Waiver**

I give Dance Trap, Inc. my permission for the public display of pictures and or video of my child for possible advertisement purposes (i.e. brochures, newspaper ads, web site, etc. - no names will be used).

I hereby agree to the above waiver.

\_\_\_\_\_  
(Parent Signature) (Date)



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